## **LOUISIANA**

## **ECONOMIC DEVELOPMENT**

Physical Address 1051 North Third Street Baton Rouge, LA 70802

## **ADVANCE NOTIFICATION**

Mailing Address
P.O. Box 94185
Baton Rouge, LA 70804-9185

Date: \_

PLEASE TYPE

Visit <a href="https://www.led.louisiana.gov">https://www.led.louisiana.gov</a> for on-line filing Phone: 225/342-5398 Fax: 225/342-0142

	BUSINESS IN	IFORMATION		
Has an Advance Notification been filed on the If Yes, Give Assigned #		· -		
Business Name				
Corporate Name (if different from business r	name - optional)			
Mailing Address1		Mailing Add	lress2	
City		_ State	Zip Code	
Physical Address1 (If Different from Mailing)				
Physical Address2				
City		State	Zip Code	
Phone Number	Ext	Fax Number		
Website Address			Is it a foreign-owned company? ☐ Yes ☐	No
State/Province	Country		NAICS Code	
Ownership Type:   Corporation  Non-Profit Organiza  Limited Liability	ation $\square$	S-Corporation Limited Partnership General Partnershi		
	PARENT COMPA	NY INFORMAT	TION	
Company Name				
Address1		Address2		
City	State		Zip Code	
Phone Number	Ext _		Fax Number	
Website Address				
	PRO	DJECT		
Project Type: ☐ Start-up/New	☐ Additions	☐ Expansion		
Project Name: (Optional)				
Provide a description of this project.				
Project Physical Address1		Project Physica	al Address1	
City	State		Zip Code	
Phone Number	Ext		Fax Number	
Parish	Munic	ipal District (If Orlea	ans parish)	
Is this project within city limits? ☐ Yes ☐	No NAICS Code			

 $\textbf{IMPORTANT NOTE: } \textbf{This form and fees} \underline{\textbf{must}} \textbf{ be received by Business Incentives} \underline{\textbf{before}} \textbf{ Construction, Purchasing, or Hiring begins.}$ 

Estimated Project Dates and Information								
Beginning Date		End	ding Date					
Estimated Investments Costs		Estimated Number of Jobs		Estimated Payroll				
Building & Material	\$	New	. 0. 00.00	New	\$			
Machinery & Equipment	\$	Existing		Existing	\$			
Labor & Engineering	\$	Transferred In-State		Transferred In-State	\$			
		Transferred		Transferred	\$			
		Out-of-State Contract		Out-of-State Contract	\$			
		Construction		Construction	\$			
Total Investment	\$	Total Jobs		Total Payroll	\$			
s there any gaming activity a are any owners of this projec		ng activities elsewhere?						
		CONTACT INFORMA	ATION					
Contact Type (Must have lega	al authority to sign):	☐ Business ☐ Consult	ant					
Prefix First Nar	me	MI Last	Name		Suffix			
Contact's Company name				Title				
Mailing Address1		Ma	ailing Address	s2				
City		State		Zip Code	<del>-</del>			
Phone Number		Ext	Fax Numb	oer				
Email Address								
OPTIONAL: Local Economic Contact Name				,				
			Zip Code					
Phone								
		CENTIVE PROGRAM(S						
		`	•					
Check each program for whic □ Enterprise Zone □		Ine lee is \$100 for each of the Industrial Tax Exemption	-		or. Restoration Tax Abatemen			
3 Enterprise Zone E	_ Quality 5005	Industrial Tax Exemption	(iviai idiacidi)	ers Orliy) 🗀	Nestoration Tax Abatemen			
Amount Due: \$								
Company	/ Official Signature			Print Official Na	me and Title			
, ,	J			For Office Use Only				
			Date	Received				
			Rece	•				
			Chec					
				ck Amount				
			Initial	s				